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Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions	C Name of organization TRINITY VALLEY QUILTERS' GUILD Number and street (or P O box, if mail is not delivered to street address) Room/suite P. O. BOX 122658 City or town, state or country, and ZIP + 4 FORT WORTH, TX 76121-2658	D Employer identification number 75-1981019 E Telephone number F Group Exemption Number ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). **G Accounting Method** Cash Accrual Other (specify) ▶

I Website: ▶ N/A
J Tax-exempt status (check only one) — 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	4,551
	2 Program service revenue including government fees and contracts	2	17,833
	3 Membership dues and assessments	3	7,250
	4 Investment income	4	19
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ of contributions reported on line 1)	6a	46,652
	b Less: direct expenses other than fundraising expenses	6b	39,347
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	7,305	
Expenses	7a Gross sales of inventory, less returns and allowances	7a	
	b Less cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
	8 Other revenue (describe ▶ See Statement 2)	8	1,091
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	38,049
Net Assets	10 Grants and similar amounts paid (attach schedule)	10	8,000
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ▶ See Statement 4)	16	37,376
	17 Total expenses. Add lines 10 through 16	17	45,376
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(7,327)	
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	75,950	
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	68,623	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

		(See the instructions for Part II.)	
		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	75,903	22 align="right">60,790
23	Land and buildings	47	23
24	Other assets (describe ▶ Prepaid Expense)		24 align="right">8,000
25	Total assets	75,950	25 align="right">68,790
26	Total liabilities (describe ▶)		26 align="right">167
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	75,950	27 align="right">68,623

SCANNED APR 16 2010



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Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here
 ▶ *Sally Brown* Signature of officer ▶ 3-16-10 Date
 ▶ SALLY BROWN, TREASURER Type or print name and title

Paid Preparer's Use Only
 Preparer's signature ▶ *Kevin S Benesh* Date ▶ 3/11/10
 Check if self-employed
 Preparer's identifying number (See instructions) ▶ P00296044
 Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KEVIN S BENESH, CPA
 EIN ▶ 75-2848474
 Phone no ▶ 817-338-9622

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization TRINITY VALLEY QUILTERS' GUILD	Employer identification number 75-1981019
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Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
 - e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		
 - (ii) A family member of a person described in (i) above?

	Yes	No
11g(ii)		
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(iii)		
 - h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	18,449	13,345	16,598	16,790	11,801	76,983
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	67,442	59,129	65,456	80,918	65,576	338,521
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	85,891	72,474	82,054	97,708	77,377	415,504
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	62,442	54,129	60,456	75,918	60,743	313,688
c Add lines 7a and 7b	62,442	54,129	60,456	75,918	60,743	313,688
8 Public support (Subtract line 7c from line 6)						101,816

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	85,891	72,474	82,054	97,708	77,377	415,504
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	164	271	270	64	19	788
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	164	271	270	64	19	788
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						416,292

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	24.46%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	28.2602%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.19%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.2241%

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Special Events Schedule

Form 990-EZ

2009

Description: ANNUAL QUILT SHOW

PART I

Line 6a: Gross Revenue	\$	46,652
Line 6b Direct Expenses:		
Awards & Ribbons	\$	3,010
Copies & Supplies		29
Conservation		52
Decorations		7,117
Misc Capital Items		509
Entry Forms		256
Insurance		200
Judging		1,829
Labels		315
Merchant Mall		1,234
Miscellaneous		55
Programs		1,139
Publicity		3,447
Ribbons		638
Rent of Exhibit Hall		15,000
Sales Expense		2,825
Security		1,100
Signs		103
Volunteer Exps		39
Refunds		450
Line 6b: Direct Expenses	\$	<u>39,347</u>
Line 6c: Net Income from Special Events	\$	<u><u>7,305</u></u>

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	Amount
MEMBERSHIP DUES	\$ 7,250
Total	<u>\$ 7,250</u>

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
NEWSLETTER ADVERTISEMENTS	\$ 405
LIBRARY SALES	686
	<u>\$ 1,091</u>

Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid

Description of Property	Cash Contribution
MEALS ON WHEELS	\$ 1,000
NORTHSIDE INNER CHURCH AGENCY	1,000
WOMAN'S CENTER OF TARRANT COUNTY	1,000
THE WARM PLACE	500
CENTRAL CHRISTIAN CHURCH	500
TARRANT COUNTY FOOD BANK	1,000
ANGEL FOOD MINISTRIES	500
SCHOLARSHIP - UNIVERSITY OF TEXAS	1,250
SCHOLARSHIP - TEXAS A & M UNIV.	1,250
	<u>\$ 8,000</u>

Federal Statements

Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
ADMINISTRATIVE - OFFICER	\$ 287
BANK CHARGES	421
BOND INSURANCE & LIABILITY	1,007
DEPRECIATION	47
HISTORIAN	9
HOSPITALITY SUPPLIES	90
JPS QUILTS	501
LIBRARY SUPPLIES	189
MEMBERSHIP EXPENSES	1,340
POST OFFICE BOX FEES	176
NEWSLETTER PUBLISHING	4,004
PROFESSIONAL SERVICES	1,850
MINI SILENT AUCTION	15
MISCELLANEOUS EXPENSES	163
PROGRAMS	7,582
STORAGE RENTAL FEES	2,094
TOURS AND RETREATS	12,375
WEBSITE SERVICE FEES	1,120
WORKSHOPS	4,106
	<hr/>
	\$ 37,376
	<hr/>

Federal Statements

Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

To provide grants to charitable organizations, perform community service projects, and offer educational programs and workshops promoting the craft of quilting.

Statement 6 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Description

Cash contributions to various charitable organizations including scholarship award recipients selected by the organization. These contributions are made to comply with the exempt purpose of the Guild to give back to the community at large to assist various people who are in need of such support from local charities.

Statement 7 - Form 990-EZ, Part III, Line 29 - Statement of Program Service Accomplishments

Description

The organization offers educational programs and workshops to promote interest in their craft of quilt making for both personal enjoyment and satisfaction in addition to generating funds from the sales of the finished quilts that can be used to support various local charitable organizations as described elsewhere in this informational report as required by law.

Federal Statements

Schedule A, Part III, Line 7b - Excess Gross Receipts

<u>Year</u>	<u>Total</u>	<u>Excess</u>
2009	\$ 65,743	\$ 60,743
2008	80,918	75,918
2007	65,456	60,456
2006	59,129	54,129
2005	67,442	62,442
	<u>\$ 338,688</u>	<u>\$ 313,688</u>